~**	FEE TRANSMITTAL					Complete If Known					
EMAIL						Application No. 09/700,512					
[MAIL STOP]					Filing Date		е	November 13, 2000			
					First Named Inventor		ed Inventor	Simon Daniel SCULLION et			
					Examiner Name		Name	Curtis Edward SHERRER			
					<u> </u>	oup Art		1761			
Tota	al Am	ount Of Payment	(\$) 1,020	00	-			072819.0125			
1010	Total Amount Of Payment (\$) 1,020.00  METHOD OF PAYMENT (check one)				FEE CALCULATION (contin				nued)		
1.		· · · ·	oner is hereby	-	3. ADDITIONAL FEES						
1.	ш	charge indicate		Fee Description			Fee	Fee Paid			
		payments to Deposit Account No. 02-03				•	harge - late filing f	ee or oath	\$		
		in the name of Baker Botts L.L.P.					harge - late provis r sheet	sional filing fee or	\$		
	Charge any additional fee required under 37				×	Extension for reply with 3 month			\$	1020.	
		C.F.R. §§ 1.16 and 1.17 to Deposit Account No. 02-0375.				Notic	ice of Appeal				
	110. 02 0010.					Filing	g Brief in Support	of Appeal	\$		
2.	Check Enclosed. The Commissioner is hereby authorized to charge any variance				☐ Request for Oral Hearing			\$			
					☐ Utility Issue Fee (or reissue)			\$			
		between the amount enclosed and the Patent Office charges to <b>Deposit Account No. 02-0375</b> in the name of Baker Botts				☐ Design Issue Fee ☐ Plant Issue Fee			\$		
						Plan	t Issue Fee		\$		
		L.L.P, The Warner, Suite 1300, 1299					Petitions to Commissioner				
		Pennsylvania Avenue, N.W., Washington,			Petition to Revive (unavoidable)  Petition to Revive (unintentional)			\$			
	D.C. 20004-2400.						ion to Revive (unir	ŕ	\$		
	FEE CALCULATION				Petitions Related to Provisional Applications				\$		
1.	BASIC FILING FEE				Submission of Information Disclosure Statement				\$		
		Utility Filing Fee \$ Design Filing Fee \$ Plant Filing Fee \$				☐ Filing Submission After Final Rejection			\$ \$		
						☐ Recordation of Assignment Document					
						☐ Filing Request for Reexamination			\$		
	Reissue Filing Fee \$					☐ Other (specify) Advanced Patent Copies			\$		
		Provisional Filin	ng Fee \$								
2.	Ехт	RA CLAIMS FEES									
				CLAIMS AS	AME	NDED	r	————			
	Highest Num					Rate		_	٠		
		For	Number Present	Paid For	$\perp$	Extra	Large Entity	Small Entity		mount	
		AIMS	15	60	$\perp$		\$ 50.00	\$ 25.00	\$0.		
IND	EPEN	DENT CLAIMS	1	13			\$ 200.00	\$ 100.00	\$0.	വ	

Z. EXTRA CLAIMS I EES	l							
		CLAIMS AS AN	MENDED					
		Highest Number Paid For	Extra	R				
For	Number Present			Large Entity	Small Entity	An	nount	
TOTAL CLAIMS	15	60		\$ 50.00 \$ 25.00		\$0.00		
INDEPENDENT CLAIMS	1	13		\$ 200.00 \$ 100.00		\$0.00		
MULTIPLE DEPENDENT G	LAIMS		\$ 360.00 \$ 180.00		\$0.00			
TOTAL EXTRA CLAIMS FEES							\$0.00	
SUBMITTED BY	Complete (if applicable)							
Typed or Rrinted Name Ja	amee B Arpin	1		F	Registration No. 3			
Typed of Pulled Maine 3	aimoo e amiii		1,	Tregistration 140.				

Date

4/18/05

Deposit Account User ID

02-0375

Signature